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REVOCATION OF POWER OF ATTORNEY AND APPOINTMENT OF NEW POWER OF ATTORNEY DOCUMENTS, INCLUDING STATEMENT UNDER 37 CFR 3.73(b) FOR

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- 1. Revocation of Power of Attorney and Appointment of New Power of Attorney and Statement Under 37 CFR 3.73(b) for U.S. Patent Application Serial No. 10/424,212 (2 pages)
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- 3. Revocation of Power of Attorney and Appointment of New Power of Attorney and Statement Under 37 CFR 3.73(b) for U.S. Patent Application Serial No. 10/678,767 (2 pages)
- 4. Revocation of Power of Attorney and Appointment of New Power of Attorney and Statement Under 37 CFR 3.73(b) for U.S. Patent Application Serial No. 10/623,431 (2 pages)
- 5. Revocation of Power of Attorney and Appointment of New Power of Attorney and Statement Under 37 CFR 3.73(b) for U.S. Patent Application Serial No. 10/623,378 (2 pages)
- Revocation of Power of Attorney and Appointment of New Power of Attorney and Statement Under 37 CFR 3.73(b) for U.S. Patent Application Serial No. 10/628,141 (2 pages)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/623,378-Conf. #3207 REVOCATION OF POWER OF Filing Date July 18, 2003 **ATTORNEY WITH NEW POWER OF ATTORNEY** First Named Inventor Jay D. Kranzler AND Art Unit N/A CHANGE OF CORRESPONDENCE ADDRESS Examiner Name Not Yet Assigned Attorney Docket Number 20269/1201776-US3 I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney Is submitted herewith. OR X I hereby appoint the practitioners associated with the Customer Number: 07278 X Please change the correspondence address for the above-identified application to: The address associated with 07278 Customer Number: OR DARBY & DARBY P.C. S. Peter Ludwig P.O. Box 5257 City New York Country US State NY Zip 10150-5257 Telephone (212) 527-7700 Fax (212) 753-6237 I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) SIGNATURE of Applicant or Assignee of Record Name Signature Date Telephone 2323 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. \*Total of forms are submitted. I hereby certify that this correspondence is being facsimila transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below. Dated: Signature:

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